Image# 14940021846 PAGE 1 / 1

## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

P. O. Box 3571  Seminole  FL 33775  Name of Employer  Date (month, day, year)  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Cocupation  District (month, day, year)  Amount  Amount  District (month, day, year)  Amount  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  District (month, day, year)  District (month, day, year)  District (month, day, year)  Date (month, day, year)  District (month, day, year)	NAME OF COMMITTEE IN FULL     FRIENDS OF DAVID JOLLY				
INDIAN ROCKS BEACH  2. NAME OF CANDIDATE Jolly W. David  3. OFFICE SOUGHT (State and District) House FL 13 COOS51572  5. IS THIS AN AMENDMENT? No. THIS IS A NEW FILING  YES, IT AMENDS THE NOTICE FILED ON  A. FULL NAME, MAILING ADDRESS AND ZIP CODE  Victory Political Action Committee P. O. Box 3571  Seminole  FL 33775  B. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Date (month, day, year)  Occupation  Date (month, day, year)  Occupation  Date (month, day, year)  Date (month, day, year)  Amount  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount					
2. NAME OF CARDIDATE JOILY W. David  3. OFFICE SOUGHT (State and Distret) House FL 13  4. FECT IDENTIFICATION NUMBER C00561572  5. ISTHIS AN AMENDMENT? NO. THIS IS A NEW FILING YES, IT AMENDS THE NOTICE FILED ON // A. FULL NAME, MAILING ADDRESS AND ZIP CODE VICTORY POlitical Action Committee P. O. Box 3571  Transaction ID: WFT2014011157-1 Occupation  Date (month, day, year) 01/10/2014 5000.00  Transaction ID: WFT2014011157-1 Occupation  Date (month, day, year)  Date (month, day, year)  Amount day, year)  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)	CITY, STATE, and ZIP CODE				
Jolly W. David  House FL 13 C00551572  5. ISTHIS AN AMENDMENT? NO. THIS IS A NEW FILING  YES, IT AMENDS THE NOTICE FILED ON  / / A. FULL NAME, MAILING ADDRESS AND ZIP CODE  Victory Political Action Committee P. O. Box 3571  Seminole FL 33775  B. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Date (month, day, year)  Amount  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)	INDIAN ROCKS BEACH	FL 3378	35		
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING NEW FILING YES, IT AMENDS THE NOTICE FILED ON  A. FULL NAME, MAILING ADDRESS AND ZIP CODE  Victory Political Action Committee  P. O. Box 3571  Transaction ID: WFT2014011157-1  Occupation  Transaction ID: WFT2014011157-1  Occupation  Date (month, day, year)  Occupation  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)		3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE  Victory Political Action Committee P. O. Box 3571  Seminole B. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Name of Employer  Date (month, day, year)  Occupation  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Date (month, day, year)  Occupation  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Date (month, day, year)  Occupation  Date (month, day, year)	Jolly W. David	House	FL 13	C00551572	
Victory Political Action Committee  P. O. Box 3571  Seminole  FL 33775  B. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Name of Employer  Date (month, day, year)	5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE	NOTICE FILED ON		/
P. O. Box 3571  Seminole  FL 33775  B. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)	A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer			Amount
P. O. Box 3571  Seminole  FL 33775  Name of Employer  Date (month, day, year)  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Amount  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Discupation  Discu	Victory Political Action Committee			day, year)	
Seminole  FL 33775  Transaction ID: WFT2014011157-1 Occupation  Name of Employer  Date (month, day, year)  Amount  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount  Cocupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Date (month, day, year)  Amount  Description  Date (month, day, year)	D. O. Poy 2574			01/10/2014	5000.00
Seminole  FL 33775  Occupation  Name of Employer  Date (month, day, year)  Occupation  C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Description  Date (month, day, year)  Occupation  Date (month, day, year)  Occupation  Date (month, day, year)	P. O. BOX 3571	Transaction ID : W	Transaction ID - WET2014011157 1		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Occupation  Date (month, day, year)  Amount  Occupation  Date (month, day, year)  Amount  Occupation  Date (month, day, year)  Occupation  Date (month, day, year)  Occupation  Date (month, day, year)  Date (month, day, year)  Amount  Occupation  Date (month, day, year)  Date (month, day, year)  Occupation  Date (month, day, year)					
C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Amount  Amount  Occupation  Date (month, day, year)  Amount  Date (month, day, year)	Seminole FL 33775	·			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Amount  Occupation  Date (month, day, year)  Amount  Date (month, day, year)	B. FULL NAME, MAILING ADDRESS AND ZIP CODE	MAILING ADDRESS AND ZIP CODE  Name of Employer			Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Amount  Occupation  Date (month, day, year)  Amount  Date (month, day, year)					
C. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Amount  Occupation  Date (month, day, year)  Amount  Date (month, day, year)					
Occupation  D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Occupation  Occupation  Date (month, day, year)  Occupation  E. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)		Occupation		-	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  Diagram (month)  Occupation  Diagram (month)  Diagram (month)  Amount  Diagram (month)  Diagram (month)  Amount  Diagram (month)  Diagram (month)	C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer			Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  E. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day)  Amount			. ,		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  E. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day)  Amount		Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day, year)  Occupation  E. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, day)  Amount					
Occupation  E. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, Amount					
Occupation  E. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer  Date (month, Amount	D. FULL NAME, MAILING ADDRESS AND ZIP CODE	MAILING ADDRESS AND ZIP CODE  Name of Employer			Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, Amount				day, year)	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, Amount					
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, Amount					
L. I GEE MANIE, MAILING ADDITEOS AND 211 GODE		Occupation		-	
day year)	E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount
uay, year)				day, year)	
Occupation		Occupation			
SIGNATURE (optional)  DATE  For further information contact:		<u> </u>		For further i	nformation contact:
Watkins H. Nancy  [Electronically Filed]  O1/11/2014  Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	•	·		Federal Election Commission 999 E Street, NW, Washington, DC 20463	

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

